	<p>DELAWARE HEALTH AND SOCIAL SERVICES</p> <p>Division of Services for Aging and Adults with Physical Disabilities</p>	<p>Day Habilitation Service Specification Acquired Brain Injury Waiver</p>
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WAIVER SERVICE SPECIFICATION

1.0 SERVICE DEFINITION

- 1.1 Assistance with acquisition, retention, or improvement in self-help, socialization and adaptive skills that takes place in a non-residential setting, separate from the participant's private residence or other residential living arrangement. Activities and environments are designed to foster the acquisition of skills, appropriate behavior, greater independence, and personal choice. Services are furnished 4 or more hours per day on a regularly scheduled basis for 1 or more days per week or as specified in the participant's service plan. Meals provided as part of these services shall not constitute a "full nutritional regimen" (3 meals per day). Day habilitation services focus on enabling the participant to attain or maintain his or her maximum functional level and shall be coordinated with any physical, occupational, or speech therapies in the service plan. In addition, day habilitation services may serve to reinforce skills or lessons taught in other settings.

2.0 SERVICE GOAL

- 2.1 The goal of day habilitation is:
- 2.1.1 The acquisition and/or maintenance of personal and social adjustment skills.
 - 2.1.2 The enhancement of the participant's functional competence in real world situations.
 - 2.1.3 Foster successful integration into the community and
 - 2.1.4 A higher level of independence for the participant.

3.0 SERVICE UNIT

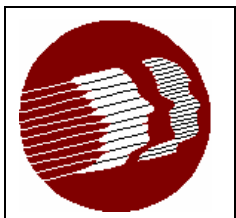
- 3.1 There are two (2) units of service for Day Habilitation:
- 3.1.1 Half day rate: up to 4.5 hours.
 - 3.1.2 Full day rate: 4.5 hours or more.
- 3.2 Transportation is to be incorporated in the unit rate.
- 3.2 Day Habilitation services may not be billed during the same period of the day as Adult Day Health/Care services.
- 3.3 There is a limit of no more than four (4) days per week of either the Day Habilitation service or combined levels of Adult Day Service. Exceptions must be prior authorized by the designated case management provider and/or the Division of Services for Aging and Adults with Physical Disabilities (DSAAPD).

4.0 SERVICE AREA

- 4.1 Providers of Day Habilitation are permitted to define sub-areas of service within the state.

5.0 SERVICE LOCATION



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- 5.1 Day Habilitation services are provided in a non-residential setting.
- 5.2 Day Habilitation services may be provided in a licensed Adult Day Care (ADC) as long as the program participant meets the intent of the ADC regulations.

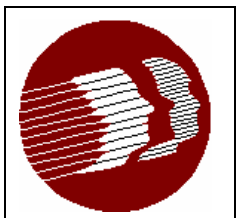
6.0 SERVICE DESCRIPTION

- 6.1 Day Habilitation services are to be prior-authorized by the Division of Services for Aging and Adults with Physical Disabilities (DSAAPD), or authorized agent.
- 6.2 The composition of services may include:
 - 6.2.1 Life skills training: such as assistance and training with financial resource management, utilization of community resources and management of personal assistance services.
 - 6.2.2 Training and support of ADLS, household management, cooking, nutrition, family and child support activities, health and disability self-management, social integrations skill, and interpersonal relationships.
 - 6.2.3 Attending and safety, problem solving, task completion, following instructions, attendance and punctuality, medication management strategies, community transportation skills, sensory/motor skills, and mobility.
 - 6.2.4 Teaching concepts and skills that promote independence.
- 6.3 Personal care/assistance may be a component part of Day Habilitation, as necessary to meet the needs of a participant, but may not comprise the entirety of the service.
- 6.4 For individual with degenerative conditions, Day Habilitation may include training and supports designed to maintain skills and functioning and prevent or slow regression.

7.0 SERVICE STANDARDS


- 7.1 The provider must comply with all applicable Federal, State, and local rules, regulations, and laws applying to the provision of the service.
- 7.2 The provider shall not enter into any subcontracts for any portion of the coordination of services covered by this contract without obtaining prior written approval from DSAAPD.
- 7.3 The provider's program administrator/director must; have a bachelor's degree in health or social services or a related field, with one (1) year supervisory experience in a social or health service setting; or be a registered nurse with two (2) years of supervisory experience.
- 7.4 The provider must develop and maintain policies and procedures for the delivery of Day Habilitation services to include:
 - 7.4.1 participant admission/discharge processes and criteria
 - 7.4.2 scope of service
 - 7.4.3 quality assurance and participant satisfaction
 - 7.4.4 complaint resolution/grievance procedure
 - 7.4.5 discharge of participant
 - 7.4.6 personnel, training and staff development.



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- 7.5 The provider must contact the referred participant and initiate the admissions process within seven (7) calendar days of receiving the completed referral packet from the designated case management provider.
- 7.6 The provider must notify the designated case management provider if admission does not occur within thirty (30) calendar days of the referral.
- 7.7 The provider care plan must:
 - 7.7.1 Be developed in accordance with the participant's overall approved assessment of needs and plan of care.
 - 7.7.2 Reflect the recommendations of the designated case management provider.
 - 7.7.3 Be appropriate and coordinated with other therapies.
 - 7.7.4 Include days and hours of attendance
 - 7.7.5 Include emergency procedures
 - 7.7.6 Include specific defined goals for day habilitation services (Assistance with acquisition, retention, or improvement in self-help, socialization and adaptive skills).
 - 7.7.7 Include objectives (with projected time frames) to provide steps to achieving the goals.
 - 7.7.8 Include activities, programs and services in which the person will participate in order to meet those needs.
 - 7.7.9 Be signed by the participant and representative, if any, the designated case management provider and the day habilitation provider.
 - 7.7.10 Be given to the participant and representative, if any, the designated case management provider and a copy shall be kept at the facility.
- 7.8 The provider must formally review the care plan monthly with the participant, their representative, if any and the designated case management provider. The reviewed/ amended care plan must be signed during this meeting, by the participant and representative, if any, the designated case management provider and the day habilitation provider.
- 7.9 The provider must notify the participant of any change in schedule, or interruption of service.
- 7.10 The provider must discuss any proposed modification of the care plan with the designated case management provider.
- 7.11 The provider agency must maintain documentation to include:
 - 7.11.1 Records for each participant with monthly notes on participant's status/ progress towards goals.
 - 7.11.2 Each monthly entry should record and report the progress of individuals according to their care plans.
 - 7.11.3 Maintain a record of medications administered, therapeutic diet. Errors with medications or non-compliance with diet should be noted in accordance with agency policy & procedure manual.
 - 7.11.4 Maintain a participant file to include medications, diet, special needs, ADL assistance needs and plans to meet those needs, emergency contacts
- 7.12 The provider must ensure access to authorized representatives of Delaware Health and Social Services and/or CMS to the participant's case files and medical records.



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- 7.13 The provider must inform the Division of Medicare and Medicaid Services (DMMA) of other potential payors of Day Habilitation service (i.e. Hospice, Medicare, etc.)
- 7.14 The provider must assure the participant's right of privacy and confidentiality.
- 7.15 The provider must comply with DSAAPD quality assurance initiatives related to this program.
- 7.16 The provider must cooperate with the designated case management provider and DSAAPD to resolve problems which threaten participant service.
- 7.17 The provider reserves the right to suspend or terminate a participant's attendance at any time. The suspension must be communicated verbally and in writing to the participant and their representative, if any, and the designated case management provider. The notification must include the reasons for the suspension and the steps that must be taken by the participant to resolve the issue.
- 7.18 The provider must notify the designated case management provider, DSAAPD, and the participant in writing two (2) weeks prior to termination of services. The notification must include reasons for the termination and steps taken by the provider to resolve the issues.
- 7.19 The provider must retain a relationship with the designated case management provider, and must advise the case management provider when recommending a change in program attendance within or between agencies.
- 7.20 The provider must have timekeeping records sufficient to document the presence of staff at each program site.
- 7.21 The provider must have at least one (1) staff person accessible to participants during program operation who are familiar with:
 - 7.21.1 implementing emergency procedures, including CPR.
 - 7.21.2 trained in Assistance With Self Administration of Medication (AWSAM).
 - 7.21.3 capable of reporting variances from the prescribed diet and knowledge of dietary needs.
- 7.22 The provider must provide service in a facility that:
 - 7.22.1 is ADA accessible. (American Disabilities Act)
 - 7.22.2 is a physical setting adequate in size and design to promote efficiency and flexibility in operations, shall be equipped to meet established standards for all professional and general services it provides, as applicable to state, local and federal regulations.
 - 7.22.3 has at least one (1) telephone at the site
 - 7.22.4 have adequate heating, sanitation, ventilation, light, stairways, and hallways.
 - 7.22.5 structure will be clean and in good repair.

